2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000027337

Entity Name: ELISA GRABOIS, P.A.

City-St-Zip:

() Delete

Title:

Name:

Address:

City-St-Zip:

FILED Mar 03, 2004 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
6568 VILLA SONRISA DRIVE 1420 BOCA RATON, FL 33431				6568 VILLA SONRISA DRIVE 1420		
				BOCA RATON, FL 33433		
Current Mailing Address:				New Mailing Address:		
6568 VILLA SONRISA DRIVE 1420 BOCA RATON, FL 33431				6568 VILLA SONRISA DRIVE 1420		
				BOCA RATON, FL 33433		
FEI Number:	13-4241936	FEI Number Applied For ()	FEI Nun	nber Not App	olicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
GRABOIS, ELISA 6568 VILLA SONRISA DRIVE 1420 BOCA RATON, FL 33431				GRABOIS, ELISA 6568 VILLA SONRISA DRIVE 1420 BOCA RATON, FL 33431		
The above in the State		ubmits this statement for the p	urpose o	f changing	its registe	ered office or registered agent, or both,
SIGNATURE: ELISA GRABOIS Electronic Signature of Registered Agent				03/03/2004		
				Date		
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	GRABOIS, ELIS	NRISA DRIVE 1420		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address:	()	Delete		Title: Name: Address:	VP GRABOI: 6568 VIL	() Change (X) Addition S, ADAM .LA SONRISA DRIVE

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

BOCA RATON, FL 33433

6568 VILLA SONRISA DRIVE

BOCA RATON, FL 33433

GRABOIS, ERIC

() Change (X) Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELISA GRABOIS PD 03/03/2004